

**Arizona Department of Health Services  
Division of Behavioral Health Services  
Memorandum**

**Date:** March 26, 2004  
**To:** Stakeholders  
**From:** Dan Wendt, Policy Office Manager  
**Re:** Final Notice of Changes to the ADHS/DBHS Covered Behavioral Health Services Guide

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The following is an amended summary of revisions to the ADHS/DBHS Covered Behavioral Health Services Guide, Version 5.1 which will become effective\* and posted to the ADHS/DBHS website on or around April 1, 2004. **Special attention should be given to items 4, 11, 13, and 14 as they have been amended or added since the ADHS/DBHS March 5, 2004 memorandum entitled “Changes to the ADHS/DBHS Covered Behavioral Health Services Guide”.**

\* Item number 1. will become effective April 15, 2004.

1. Assessment codes:
  - Effective April 15, 2004, the new rate for H0031, Mental Health Assessment by Non-physician, will be \$42.00 per 30 minutes. This new rate applies to dates of service on and after April 15, 2004. REPLACE Appendix B-2.
  - Effective for dates of service on and after April 15, 2004, discontinue service code H2000, Comprehensive Multidisciplinary Evaluation. Tribal contracted providers who are using H2000 are advised to use H0031 for dates of service on and after April 15, 2004. REPLACE Page 32 and Appendix B-2.
2. References to former ADHS/DBHS policies and procedures throughout the guide and applicable appendices will be changed to reference appropriate ADHS/DBHS provider manual section(s). REPLACE: Pages 12, 21, 45-47, 51, 53, 61, 88 and Appendix B-4.
3. Add place of service code 23 – emergency room-hospital, to the Place of Service (POS) codes listed in the Introduction section of the guide. REPLACE Page 18.
4. Section II. G. 1.: Remove service codes H0018 TF, Behavioral Health Short-Term residential (Level II) without Room and Board, Intermediate Level of Care and H0018 TG, Behavioral Health Short-Term Residential (Level II) without Room and Board, Complex Level of Care. REPLACE Pages 130-131.
5. Revise Appendix B-2 to include the following provider types for service code H2014 HQ, skills training and development – group: 39, 72, 77, 85, 86, 87, A3 and A6. REPLACE Appendix B-2.

6. Section II. D. 7, Supported Housing and Appendix B-2 – remove the following place of service codes: 11, 22, 50, 53, 55, 71 and 72. REPLACE Page 91 and Appendix B-2.
7. Section II. H. 2, Therapeutic Behavioral Health Services and Day Programs: Service code H2019, therapeutic behavioral services – delete T/RBHA (72) as a valid place of service and replace with Rural Health Clinic (72). REPLACE Page 140.
8. Section II. D. 10, Transportation. Add the following information: (may be used to encounter and/or bill for bus passes) to service code A0110, non-emergency transport via intra- or interstate carrier. REPLACE Page 99.
9. Appendix B-2: Add the following service code: S0163 – Injection, Risperidal Consta (Risperidone, long-acting). REPLACE Appendix B-2 and Page 52.
10. Section II. B. 3, Behavioral Health Prevention/Promotion Education and Medication Training and Support Services (Health Promotion): Revise general definition for health promotion. REPLACE Page 43-44.
11. Appendix B-2: Clarify rates for S0215—Ambulatory Van, Urban (\$1.12) and S0215 TN - Ambulatory Van, Rural (\$1.34). REPLACE Appendix B-2.
12. Section II. D. 6, Unskilled Respite Care: Remove Provider Type 02 (Level I Hospital) from service codes S5150 and S5151. REPLACE Appendix B-2 and Page 89.
13. Section II. D. 10, Transportation. Remove service code S0125 as an allowable transportation code. REPLACE Page 101-102.
14. Add Appendix B-5, Billing Limitations Matrix.

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For persons maintaining a hard copy of the ADHS/DBHS Covered Behavioral Health Services Guide:

**Summary of Replacement Appendices and Page Numbers**

<b>Section</b>	<b>Replace</b>
Covered Services Guide	Pages 12, 18, 21, 32, 43-47, 51-53, 61,88, 89, 91, 99, 101, 102, 130, 131 and 140
Appendix B-2	Entire Appendix
Appendix B-4	Entire Appendix
Appendix B-5	Entire Appendix